P. 2

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Marc Morin

Attorney Docket No.: CISCP239/4109

Application No.: 09/766,784

Examiner: Klimach, P.

FEE VALUE
ACCOUNTABILITY
POSIT ACCOUNT NO.

Filed: January 22, 2001

Group: 2135

FEE VALUE

CODE

1201

LIBNISHED

88. ÇD

Title: METHOD AND SYSTEM FOR DIGITALLY SIGNING MPEG STREAMS

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being transmitted via
facsimale in the U.S. Pagent and Trademark Office, Auention:
Examiner Klimach, at Maximile telephone number (703) 872-9306

on October 7, 2004

ioned:

AMENDMENT TRANSMITTAL

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

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X

Transmitted herewith it an Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	15	MINUS	20	00	x9 =	x 18=
Independent	05	MINUS	04	01	x 44 =	x 88 = 88
Claims	ndent Claim Pr	\$150.00	\$300.00			
Mutuble Debe	ment Chair			Total	\$	\$88

Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 500388.

Please charge the required fees, and any additional fees required to facilitate filing the enclosed response, to Deposit Account No. 500388 (Order No. CISCP239).

Respectfully submitted, BEYER WEAVER & THOMAS, LLP

Godfrey K. Kvan Reg. No. 46,860

P.O. Box 778 Berbeley, CA 94704-0778

Reg. D. Box *17*8

PAGE 27 ' RCVD AT 10/7/2004 7:20:28 PM (Eastern Daylight Time) ' SVR:USPTO-EFXRF-1/1 ' DNIS:8729306 ' CSID:15108436203 ' DURATION (mm-ss):02-04

11/22/2004 HSHITH1 00000001 500388 0976678

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PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 09 766 784													
CLAIMS AS FILED - PART I (Column 1) (Column 2)							MALL	EN		OR	OTHER SMALL		
TOTAL CLAIMS			14				ſ	RATE		FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			4 minus 20=		٠ ٥		Ī	X\$ 9=			OR	X\$18=	_
INDEPENDENT CLAIMS			4 minus 3 =					X40=			OR	X80=	80
MULTIPLE DEPENDENT CLAIM PRESENT							+135=	_		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2							•	TOTAL			OR	TOTAL	290
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMAL	L E	NTITY	OR	OTHER SMALL	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	• 15	Minus	•• 2	20	=		X\$ 9:	=		OR	X\$18=	
AME	Independent	. 5	Minus	***	4	=		X40=			OR	×89=	88.00
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							J	+135	×		OR	+270=	
								TO1 ADDIT. F			OR	TOTAL ADDIT, FEE	
		(Column 1)	•	(Colu	ımn 2)	(Column 3		ADDI1. F	EE (, , , , , , , , , , , , , , , , , , , ,	•
ENTB		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER TIOUSLY D FOR	PRESENT EXTRA		RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	•	Minus	**		=		X\$ 9	=		OR	X\$18=	
	Independent	•	Minus	***	17.0) 4114	-	4	X40	_		OR	X80=	
F	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135	=		OR	+270=	
								TO ADDIT. F	TAL		OR	TOTAL ADDIT. FEE	
		(Column_1)			umn 2)	(Column 3							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NU PRE\	HEST MBER /IOUSLY D FOR	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	•	Minus	••		=		X\$ 9	=		OR	X\$18=	
AME	Independent		Minus	<u> </u>	AT 60 AND	=	Ļ	X40	 =		OR	Χ8Û=	
	FIRST PRES	NTATION OF A	AULITE DE	PENUE	NI CLAIN	· L	_	+135			OR	070	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	TOTA			
	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
	ine Highest Nu	moer Previously P	ald For (Total C	ı ındebe	indenii) is U	e afisasi utu	Jel 10	A1114 (11 (1)	a at	Shiohiigra n	UA 131 C	~ ••••••••••••••••••••••••••••••••••••	

Application or Docket Number